



SOCIABLES

Together We Play
Social Skills Group

Madison Youth and Family Services presents “Sociables”, a group where kids can learn and practice social skills. Social skills are an important part of a child’s development and success. Social skills will be taught through collaborative art work, games, and storytelling. The skills taught will help kids to look at “size of the problem”, body and spatial awareness, working together, and conflict resolution. The group will be led by Taylor Scalia, LMFT and Frankie Esposito, MFT.

Who: K to 3rd graders

When: Every Monday from July 19th to August 27th, 2021

(6 Sessions)

Time: 1:30-2:30pm

Where: Madison Youth & Family Services, 10 School Street

Fee: Most insurance plans cover group costs. Inquire about yours today!

For more information, please read the Sociables Program Outline. If you are ready to sign your child up, please complete a Sociables Registration Form. Please contact Taylor Scalia, LMFT via email at scaliat@madisonct.org or call 203-245-5645 with any additional questions.



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MYFS Social Skills Group Program Outline

The goal of MYFS Sociables group is to help kids learn and practice social skills. Social skills are an important part of a child's development and success. Social skills will be taught through collaborative art work, games, and storytelling. The skills taught will help kids to look at "size of the problem", body and spatial awareness, working together, and conflict resolution.

Program Outline

Over the course of the 6 week session, a topic related to social skill development will be taught through experiential activities, storytelling, and then opportunities to use those particular skills collaboratively on a group art project. Resources used as a basis for the curriculum each week are identified below.

Week 1: Goal: Making Connections & Getting Familiar With Group Expectations

- The Crayon Box That Talked, Shane DeRolf
- Peer Play and the Autism Spectrum: The Art of Socializing & Imagination, Pamela J. Wolfberg

Week 2: Goal: Identifying Size of the problem?

- Zones of Regulation, Leah M. Kuypers, MA Ed. OTR/L
- My book Full of Feelings, Amy V. Jaffe, MSW & Luci Gardner

Week 3: Goal: Perspective Taking

- Thinking About You, Thinking About Me (1 & 2nd editions), Michelle Garcia Winner
- Social Skills Rules for Kids: The Top 100 Social Rules Kids Need to Succeed, Susan Diamond, MA, CCC, Foreward by Ann Gordon, PhD, BCET

Week 4: Goal: Working together & Conflict Resolution

- Playing it Right, Social Skills Activities for Parents & Teachers of Young Children with Autism Spectrum Disorders, Rachael Bareket

Week 5: Goal: Body and Spatial Awareness & Recap social skills & combined group project

- From Head to Toe, Eric Carle

Week 6: Goal: Behavioral Rehearsal of Learned Social Skills at Sociables Party



SOCIABLES-Together We Play MYFS Social Skills Group Registration Form

Parent/guardians must complete this form to register and need to submit their registration form in advance of the first session.

Demographic Information:

Child's Name: _____ DOB: _____

Grade Completed: _____ School Attending Next Year: _____

Child's Address: _____

Parent /Guardian Name(s): _____

Parent/Guardian's Cell Phone: _____ Other # _____

Parent/Guardian Email: _____

If we cannot reach you, who else should we contact in case of emergency?

Name: _____ Relationship: _____

Phone Number (s): _____

Program Fee Information:

MYFS Group session fees will apply to all participants of "Sociables" and these can be billed directly to insurance, if so authorized. Parent/guardians intending to utilize their insurance may provide insurance information at the time of registration in order to obtain pre-authorization and/or determine any portion of the fees for which they may be responsible. Parent/guardians will be responsible for any fees not covered by insurance, such as co-pays. Parent/guardians may inquire regarding self-pay fee if not utilizing insurance, and may request a fee reduction and/or fee waiver for special circumstances in accordance with agency policy. Parent/guardians must sign and submit a separate "Fee Agreement" and/or an "Authorization to Bill Insurance" form along with this group registration form, and all forms must be received prior to the child attending the first group session.

Child's Insurance Carrier: _____ Insurance ID # _____

Financial Paperwork Needed:

___ Authorization to Bill Insurance Form Completed

___ Copy of Insurance Card (both sides) Provided

___ Fee Agreement Completed (if applicable)

Additional Information:

No food will be provided by MYFS, however, children may bring their own food to Sociables group. Does your child have any food or other allergies we should be aware of? If so, please describe below:

Does your child have any medical conditions or sensitivities to environmental stimuli (sounds, tactile, etc) we should be aware of? If so, please describe below:

What do you hope your child will accomplish by participating in this group?

Parent/Guardian Authorization to Participate:

I, (*Parent/guardian*) _____ agree to have my child _____ participate in "Sociables," and acknowledge my responsibility to pay for program any fees not covered by my insurance and/or in accordance with my signed "Fee Agreement" form.

Parent/Guardian's Signature: _____ Date: _____